

IN THE UNITED STATES DISTRICT COURT
FOR THE MIDDLE DISTRICT OF PENNSYLVANIA

(1) Arich Greene 093509
(Name of Plaintiff) (Inmate Number)
501 Mall Rd Harrisburg PA 17101
(Address)

(2) _____
(Name of Plaintiff) (Inmate Number)

(Address)

(Each named party must be numbered,
and all names must be printed or typed)

vs.

CIVIL COMPLAINT

(1) Dauphin County Prison
(2) CTL
(3) _____
(Names of Defendants)

(Each named party must be numbered,
and all names must be printed or typed)

PER IBL
DEPUTY CLERK

FILED
HARRISBURG, PA

MAY 29 2025

TO BE FILED UNDER: _____ 42 U.S.C. § 1983 - STATE OFFICIALS

X 28 U.S.C. § 1331 - FEDERAL OFFICIALS

I. PREVIOUS LAWSUITS

A. If you have filed any other lawsuits in federal court while a prisoner, please list the caption and case number including year, as well as the name of the judicial officer to whom it was assigned:

II. EXHAUSTION OF ADMINISTRATIVE REMEDIES

In order to proceed in federal court, you must fully exhaust any available administrative remedies as to each ground on which you request action.

- A. Is there a prisoner grievance procedure available at your present institution? ☒ Yes ☐ No
- B. Have you fully exhausted your available administrative remedies regarding each of your present claims? ☒ Yes ☐ No
- C. If your answer to "B" is Yes:
1. What steps did you take? I wrote a grievance & several request slips
 2. What was the result? I never received a response
- D. If your answer to "B" is No, explain why not: _____

III. DEFENDANTS

- (1) Name of first defendant: Dauphin County Prison
 Employed as Dauphin County Prison at DCP
 Mailing address: 501 Mall Rd Harrisburg PA 17101
- (2) Name of second defendant: Global Telink
 Employed as GTL at DCP
 Mailing address: 501 Mall Rd Harrisburg PA 17101
- (3) Name of third defendant: _____
 Employed as _____ at _____
 Mailing address: _____

(List any additional defendants, their employment, and addresses on extra sheets if necessary)

IV. STATEMENT OF CLAIM

(State here as briefly as possible the facts of your case. Describe how each defendant is involved, including dates and places. Do not give any legal arguments or cite any cases or statutes. Attach no more than three extra sheets if necessary.)

1. I'm housed at Dauphin County Prison I was issued a ^{Tablet} GTL ~~which~~ which went missing I was promised a replacement which I never received as a result I have no access to law library, religious materials, & I can't receive mail

2.

3.

V. RELIEF

(State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.)

1.

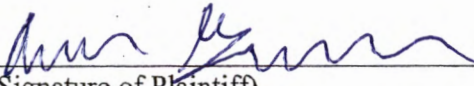
I would like to be paid for my pain & suffering & receive a new tablet

2.

3.

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 19th day of May, 2025.


(Signature of Plaintiff)

NAME: Arrish Greene
D.C.P. # 093909
DAUPHIN COUNTY PRISON
501 MALL ROAD
HARRISBURG, PA 17111-1299

HARRISBURG PA 171

22 MAY 2025 PM 41

FIRST-CLASS



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MAY 29 2025

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US Middle District Court
228 Walnut St
Harrisburg PA 17101

17101-171499

